

**APPLICATION DATA SHEET****Application Information**

Application number:: 09/977,076  
Filing Date:: 10/12/01  
Application Type:: Regular  
Subject Matter:: Utility  
Suggested classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R?:: No  
Number of CD disks::  
Number of copies of CDs::  
Sequence submission?:: No  
Computer Readable Form (CRF)?:: No  
Number of copies of CRF::  
Title :: SYSTEM AND METHOD FOR HIGH NUMERIC  
APERTURE IMAGING SYSTEMS  
Attorney Docket Number:: 120122.401  
Request for Early Publication?:: No  
Request for Non-Publication?:: No  
Suggested Drawing Figure::  
Total Drawing Sheets:: 27  
Small Entity?:: Yes  
Petition included?:: No  
Petition Type::  
Licensed U.S. Gov't Agency::  
Contract or Grant No::  
Secrecy Order in Parent Appl.?:: No



### First Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	William
Middle Name::	E.
Family Name::	Ortyn
Name Suffix::	
City of Residence::	Bainbridge Island
State or Province of Residence::	WA
Country of Residence::	US
Street of mailing address::	11546 Matsu Place
City of mailing address::	Bainbridge Island
State or Province of mailing address::	Washington
Country of mailing address::	US
Postal or Zip Code of mailing address::	98110



## Second Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	David
Middle Name::	A.
Family Name::	Basiji
Name Suffix::	
City of Residence::	Seattle
State or Province of Residence::	WA
Country of Residence::	US
Street of mailing address::	6538 Greenwood Ave N.
City of mailing address::	Seattle
State or Province of mailing address::	Washington
Country of mailing address::	US
Postal or Zip Code of mailing address::	98103

**Third Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: David  
Middle Name:: J.  
Family Name:: Perry  
Name Suffix::  
City of Residence:: Woodinville  
State or Province of Residence:: WA  
Country of Residence:: US  
Street of mailing address:: 24017 107<sup>th</sup> Drive S.E.  
City of mailing address:: Woodinville  
State or Province of mailing address:: Washington  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 98072

**Correspondence Information**

Correspondence Customer Number :: **00500**

**Representative Information**

Representative Customer Number::		<b>00500</b>
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**Domestic Priority Information**

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Non-Provisional of	60/240,125	10/12/00

**Foreign Priority Information**

Country::	Application number::	Filing Date::	Priority Claimed::

**Assignee Information**

Assignee name::	Amnis Corporation
Street of mailing address::	2025 First Avenue, Floor 12
City of mailing address::	Seattle
State or Province of mailing address::	WA
Country of mailing address::	US
Postal or Zip Code of mailing address::	98121

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